

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
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46		1				
47		1				
48		1				
49		1				
50		1				
TOTAL IND.	2					
TOTAL DEP.	49					
TOTAL CLAIMS	51					

	☆		☆		☆	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1					
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

Best Available Copy

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS